

## Town of Mukwonago and Village of Eagle Citizens Academy Application Form



Last Name:	First Name:	Middle Initial:
Driver License #:	Date of Birth:	//Sex: M / F
Street Address:		
City, State and Zip:		
Day Phone:	Night Phone:	
Have you ever been arrested for an		
( ) Yes (explain below) ( ) No	POLICE	
	EST AND THE STATE OF THE STATE	
	19.0	311
Physical Condition: ( )Good ( )Limit may choose to participate or not ba		have hands on participation. Applicants physical activity.  ONAGO - EAGLE
EMERGENCY CONTACT:	CITIZENS	ACADEMY
Name:		
Contract of the Contract of th		A Salar
Day Phone:Ni	ght Phone:	Relationship:
		EAGLE POLICE
	s actions which could reflect adv or any suggestion that I might b	- 19 CANDER CARECULAR DE L'ANDRES CARECTER DE L'ANDRES CARECTER DE L'ANDRES CARECTER DE L'ANDRES CARECTER DE L
Signature:		Date:
Mail or deliver in person the comp	leted and signed application to	:
<b>Eagle Police Department</b>	or Town of Mukwonago Police Department	
121 E. Main St.	W320 S8315 Beulah Rd.	
Eagle, WI 53119	Mukwonago, WI, 53149	